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			· JA	Mily	MARILE	(Depositor's name) (Signature) (Date)
				ecember 20,	2007	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		DRNEY DOCKET NO.	CONFIRMATION NO.
10/070,837 09/09/2002 Sami Uskela 042933/321084 2789 TITLE OF INVENTION: SATISFYING DATA REQUESTS IN A TELECOMMUNICATIONS SYSTEM						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	
nonprovisional	NO	\$ X 4 X 0X \$14	140 \$0	\$0	X X X X X \$	51 4 4 0 _{12/26/2007}
EXAMINER		ART UNIT	CLASS-SUBCLASS	J		
HO, DUC CHI		2616	370-401000			
 Change of correspondence address or indication of "Fee Address CFR 1.363). Change of correspondence address (or Change of Correspon Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cus Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1Alston & Bird LLP 2			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Nokia Corporation Espoo, Finland						
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government						
4a. The following fee(s) are submitted: Same Fee A check is enclosed. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16-0605 (enclose an extra copy of this form).						
5. Change in Entity State a. Applicant claims NOTE: The Issue Fee and	SMALL ENTITY statu	us. See 37 CFR 1.27.	b. Applicant is no lon			FR 1.27(g)(2). he assignee or other party in
interest as shown by the re Authorized Signature	ecords of the United Sta	tes Patent and Trademark	COrnice.	Date Dece	mber 21, 20	007
Typed or printed name	Guy R. G	osnell		Registration No.	34,610	A A A A A A A A A A A A A A A A A A A
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